

County Assessor's Office  
528 Monument St.  
Room 109 County Courthouse  
Greenwood, S.C. 29646-2690  
Phone: 864-942-8537 Fax: 864-942-8660

Map Number: \_\_\_\_\_

Appraiser # \_\_\_\_\_

Location: \_\_\_\_\_

Email: [assessor@greenwoodsc.gov](mailto:assessor@greenwoodsc.gov)

NOTICE OF APPEAL FOR TAX YEAR \_\_\_\_\_

Date: \_\_\_\_\_

**FOR AN APPEAL TO BE VALID, A WRITTEN OBJECTION MUST BE RECEIVED BY FIRST PENALTY DATE FOR CURRENT TAX YEAR.**

**ONLY ONE APPEAL PER PROPERTY IS ALLOWED PER YEAR (unless an Assessment Notice is sent LATER that year) FILING AN APPEAL DOES NOT RELIEVE THAT TAXPAYER FROM PAYING PENALTIES OR FEES FOR LATE PAYMENT OF TAXES.**

**Please complete this form in its entirety OR submit a letter with your opinion of value and why you are objecting to the assessment. Letter MUST include contact information, including daytime phone numbers.**

Grounds for Appeal:

\_\_\_\_\_ Disagree with Fair Market Value

\_\_\_\_\_ Other \_\_\_\_\_

I disagree with the Fair Market Value of my property because: (Be Specific)

**What is the property owner's opinion of Value? \$ \_\_\_\_\_ failure to provide a value will delay an appeal**

Any other documents available that provide evidence of value should be provided. (Such as; appraisals, contracts, offers, etc.)

If the property has been for sale in the last three (3) years, what was the asking price? Please list the agents and the dates involved.

Price \_\_\_\_\_ Agent \_\_\_\_\_ Date \_\_\_\_\_

Has the property been appraised, had a contract issued or an offer made within the last 3 years? \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, list details on reverse side of form or attach copy.

Has there been of any remodeling or additions that have been done in the last five (5) years or repair currently need? \_\_\_\_ yes \_\_\_\_ no

If yes, on the reverse indicate if it is remodeling, addition or repairs needed on the reverse of the form and list the dates and costs of remodeling or additions and/or estimate of cost for repairs. For repairs, please be specific.

Income producing property owners are to furnish three years of income and expense statements. Any other documents available that provide evidence of value should be provided. Appraiser may request additional information.

Rental Property \_\_\_\_\_ Yes \_\_\_\_\_ No Monthly Rent Received \_\_\_\_\_

**FAILURE TO PROVIDE ALL PERTINENT INFORMATION MAY DELAY YOUR APPEAL**

**Please print** owner's name, mailing address to which you wish all correspondence to be directed and a daytime phone number

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Owner's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/ State/ Zip

Business Phone ( ) \_\_\_\_\_

Taxpayer Email Address: \_\_\_\_\_

Conference Date \_\_\_\_\_

By: \_\_\_\_\_  
\_\_\_\_\_ Phone \_\_\_\_\_ Office \_\_\_\_\_ On Site

Date: \_\_\_\_\_ Copy for Appeal File \_\_\_\_\_

Form taken by: \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_